UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT

Form 1. Notice of Appeal from a Judgment or Order of a United States District Court

| Name of U.S. District Court: | | | |
|-------------------------------------|------------------------|--------------------|----------------------------|
| U.S. District Court case number | : | | |
| Date case was first filed in U.S. | District Court: | | |
| Date of judgment or order you a | re appealing: | | |
| Fee paid for appeal? (appeal fees a | re paid at the U.S. I | District Court) | |
| ○ Yes ○ No ○ IFP was g | granted by U.S. | District Court | |
| List all Appellants (List each part | y filing the appeal. I | Do not use "et al. | " or other abbreviations.) |
| | | | |
| | | | |
| | | | |
| Is this a cross-appeal? O Yes | ○ No | | |
| If Yes, what is the first appeal co | ase number? | | |
| Was there a previous appeal in t | his case? OY | es ○ No | |
| If Yes, what is the prior appeal | case number? | | |
| Your mailing address: | | | |
| | | | |
| | | | |
| City: | State: | Zip Code: | |
| Prisoner Inmate or A Number (i | f applicable): | | |
| Signature | | Date | |
| Complete and file with the attac | hed renresentation | statement in th | e US District Court |

Feedback or questions about this form? Email us at forms@ca9.uscourts.gov

Rev. 12/01/2018

UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT

Form 6. Representation Statement

Instructions for this form: http://www.ca9.uscourts.gov/forms/form06instructions.pdf

| Appellant(s) (List each party filing the appeal, do not use "et al." or other abbreviations.) |
|---|
| Name(s) of party/parties: |
| |
| |
| Nama(a) of council (if any): |
| Name(s) of counsel (if any): |
| |
| |
| Address: |
| Telephone number(s): |
| Email(s): |
| Is counsel registered for Electronic Filing in the 9th Circuit? O Yes O No |
| Appellee(s) (List only the names of parties and counsel who will oppose you on appeal. List |
| Separately represented parties separately.) |
| Name(s) of party/parties: |
| |
| |
| Name(s) of counsel (if any): |
| |
| |
| |
| Address: |
| Telephone number(s): |
| Email(s): |
| |
| To list additional parties and/or counsel use next page |

To list additional parties and/or counsel, use next page.

 $Feedback\ or\ questions\ about\ this\ form?\ Email\ us\ at\ \underline{forms@ca9.uscourts.gov}$

| Continued list of parties and counsel: (attach additional pages as necessary) |
|---|
| <u>Appellants</u> |
| Name(s) of party/parties: |
| |
| Name(s) of counsel (if any): |
| |
| Address: |
| Telephone number(s): |
| Email(s): |
| Is counsel registered for Electronic Filing in the 9th Circuit? O Yes O No |
| Appellees Name(s) of party/parties: |
| |
| Name(s) of counsel (if any): |
| |
| Address: |
| Telephone number(s): |
| Email(s): |
| Name(s) of party/parties: |
| |
| Name(s) of counsel (if any): |
| |
| Address: |
| Telephone number(s): |
| Email(s): |
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Form 6 2 New 12/01/2018